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KESTEVEN COUNTY COUNCIL
LINCOLNSHIRE

ANNUAL REPORT

OF THE
COUNTY MEDICAL OFFICER
OF HEALTH

J. H. CLARKE, M.A., M.D., D.T.M. & H., D.P.H.

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KESTEVEN COUNTY COUNCIL.

Public Health and Housing Committee.

The Chairman of the County Council
The Vice-Chairman of the County Council } *ex-officio*.

Alderman	T. W. ATKINSON (<i>Chairman</i>).	Councillor	H. GIBSON.
„	F. J. JENKINSON	„	J. W. MILNER.
„	M. E. OSBORN.	„	J. S. PRIOR.
„	Mrs. E. TAYLOR.	„	H. H. QUILTER.
„	Sir C. G. E. WELBY, Bt.	„	J. W. RABY.
Councillor	Brig.-Gen. R. L. ALDERCRON.	„	S. T. ROBERTS.
„	C. W. BARRAND.	„	Mrs. D. SCHWIND.
„	Mrs. L. BASFORD.	„	H. C. TOINTON.
„	Lt.-Comdr. J. CRACROFT-AMCOTTS.	„	Lt.-Col. F. D. TROLLOPE-BELLEW.
„	E. S. DUNKERTON.	„	(<i>Vice-Chairman</i>).
„	A. EVERETT.	„	F. G. WALL.
„	H. W. N. FANE.	„	O. C. E. WELBY.
		„	C. ST. JOHN WRIGHT.

Maternity and Child Welfare Committee.

The Chairman of the County Council
The Vice-Chairman of the County Council } *ex-officio*.

Alderman	T. W. ATKINSON (<i>Chairman</i>).	Councillor	S. T. ROBERTS.
„	F. J. JENKINSON.	„	Mrs. D. SCHWIND.
„	M. E. OSBORN.	„	H. C. TOINTON.
„	Mrs. E. TAYLOR.	„	Lt.-Col. F. D.
„	Sir C. G. E. WELBY, Bt.		TROLLOPE-BELLEW
Councillor	Brig.-Gen. R. L. ALDERCRON.		(<i>Vice-Chairman</i>).
„	C. W. BARRAND.	„	F. G. WALL.
„	Mrs. L. BASFORD.	„	O. C. E. WELBY.
„	Lt.-Comdr. J. CRACROFT-AMCOTTS.	„	A. WILSON.
„	E. S. DUNKERTON.		C. ST. JOHN WRIGHT.
„	A. EVERETT.		
„	H. W. N. FANE.		<i>Co-opted Members :</i>
„	H. GIBSON.		Mrs. GREENALL.
„	G. W. HUTSON.		Mrs. G. A. W. HILEY.
„	J. W. MILNER.		Mrs. INMONGER.
„	J. S. PRIOR.		The COUNTESS OF LIVERPOOL.
„	H. H. QUILTER.		Mrs. PALMER.
„	J. W. RABY.		Mrs. SMALLHORN.
			Mrs. B. C. THOMPSON.
			Mrs. F. G. WALL.
			Miss WELBY.

PUBLIC HEALTH OFFICERS OF THE COUNTY COUNCIL.

County Medical Officer of Health :

A. H. LOWE, M.B., C.M., D.P.H. (Resigned 30th June, 1936).

J. H. CLARKE, M.A., M.D., D.T.M. & H., D.P.H.

(Appointed 1st July, 1936).

Assistant County Medical Officer of Health :

ELLEN M. HEGARTY, M.B., Ch.B., D.P.H.

Orthopaedic Surgeon, Radiologist, and Consultant Surgeon for Surgical Tuberculosis :

G. A. C. SHIPMAN, M.A., M.B., Ch.B., M.R.C.S.

Ophthalmic Surgeon : A. C. REID, M.A., B.Sc., M.D.

Venereal Diseases Officer : A. D. FRAZER, M.B., Ch.B., D.P.H.

Medical Officers in charge of Infant Welfare Centres :

Billingham	...	Dr. A. C. SMALLHORN.
Bourne	...	Dr. J. GALLETLY and Dr. W. B. R. MONTEITH.
Cranwell Camp...		M.O., R.A.F., Cranwell.
Heckington	...	Dr. R. G. NETHERY.
Metheringham	...	Dr. E. WRIGHT.
Sleaford	...	Dr. A. C. GILES.
Stamford	...	Dr. J. A. DALE.
Waddington	...	Dr. D. S. BUCHANAN.
Washingborough		Dr. W. PARKER HARRISON.

Consulting Obstetricians :

R. B. PURVES, M.B., C.M., F.R.C.S.

R. A. WALKER, B.A., M.B., Ch.B., F.R.C.S.

District Medical Officers under the Poor Law Acts :

Dr. D. S. BUCHANAN, Dr. E. H. CRAGG, Dr. H. P. DAWSON, Dr. WILLIAM DEANE, Dr. C. S. DODSON, Dr. C. G. DYER, Dr. K. M. FOSTER, Dr. G. A. P. FRASER, Dr. CHARLES FRIER, Dr. W. PARKER HARRISON, Dr. R. H. HUDSON, Dr. O. JOHNSON, Dr. W. JOHNSTONE, Dr. T. T. KELLY, Dr. J. C. MACGOWN, Dr. ARTHUR MAIDEN, Dr. W. B. R. MONTEITH, Dr. R. G. NETHERY, Dr. PARKER (Corby), Dr. H. A. PIM, Dr. A. C. SMALLHORN, Dr. E. C. TILL, Dr. H. N. TURNOR, Dr. J. B. WHELAN, Dr. E. D. WRIGHT.

Public Analyst :

B. HENRY GERRANS, F.I.C. (Deceased 12/8/36).
A. H. M. MUTER, F.I.C., F.C.S. (Appointed 1/12/36).

Superintendent Health Visitor : Miss S. E. MORRIS, M.B.E.

County Health Visitors :

Miss H. M. BRYDEN	Miss J. E. MARTIN.
Miss E. M. JONES.	Miss A. ROOKE.
Mrs. T. KAYE.	Miss M. E. STAMFORD.
Miss A. MANNION.	

Orthopaedic Nurse : Mrs. L. M. WARD, C.S.M.M.G.

Mental Welfare Worker : Miss G. A. SHEA.

Other Officers.

*District Medical Officers of Health
and Sanitary Inspectors :*

Stamford Borough	E. A. HUTTON-ATTENBOROUGH, M.B., B.S.	F. RYMAN.
North Kesteven Rural	W. SHARRARD, M.B.	J. CHADWICK.
Grantham Borough	C. H. D. ROBBS, M.B.	S. F. NOTT.
West Kesteven Rural		G. L. ROBINSON.
Sleaford Urban	A. C. GILES, M.B.	F. CLARE.
East Kesteven Rural		A. W. CRAVEN.
Bourne Urban	J. A. GALLETTY, M.B., D.P.H.	J. S. FISHER.
South Kesteven Rural		J. ROSS.

Veterinary Surgeons :

P. E. EMSON, F.R.C.V.S., Bourne ; F. L. GOOCH, F.R.C.V.S., Stamford ;
T. HICKS, M.R.C.V.S., Sleaford ; A. D. LALOR, M.R.C.V.S., Sleaford ;
A. LOGAN, M.R.C.V.S., Bassingham ; E. PORTER SMITH, M.R.C.V.S.,
Lincoln ; F. H. SUGDEN, M.R.C.V.S., Grantham ; HENRY WALPOLE,
M.R.C.V.S., Metherringham.

KESTEVEN COUNTY COUNCIL.

COUNTY MEDICAL OFFICER'S REPORT for the Year 1936.

Area and Physical Features.

The administrative County of the Parts of Kesteven, the southernmost division of Lincolnshire has an area of 463,505 acres. It adjoins six counties and one county borough. Its boundaries are largely artificial. The central portion consists of hilly ground rising in the northern part to a height of about 400 feet above sea level, and continues as a long line of hills, known as the Cliff, through Lincoln to Winteringham on the Humber. In Kesteven the elevation descends eastwards by gentle slopes to the great plain of the Fens (of which only a small part is included in the administrative County) and westwards by a series of steps to the low ground traversed by the river Witham.

The whole district has been described geologically as consisting of a succession of soft clays and hard rocky strata. To the west is a broad plain of Lower Lias Clay ; to the east there is an outcrop of iron stone, then Upper Lias Clay capped by Lincolnshire Limestone upon which rests an overlying stratum of Great Oolite ; this gradually sinks towards the Fenland in the east.

General Statistics.

Area of the administrative County (in acres)	...	463,505
Population (Census 1921)	... ..	108,237
Population (Census 1931)	... ..	110,360
Population (Registrar-General's estimate 1936)	...	112,800
Number of inhabited houses (Census 1921)	... ..	25,456
Number of inhabited houses (Census 1931)	... ..	27,590
Number of families or separate occupiers (1921)	... ..	25,823
Number of families or separate occupiers (1931)	... ..	27,845
Rateable value (1st April, 1936)	... ..	£458,518
Actual product of a penny rate, 1935-36	... ..	£1,803 12s. 8d.

Population.

The Registrar-General's estimate of resident population, mid 1936, shows an increase of 2,440 over that for mid 1935. Details of the population of the several Urban and Rural Districts in the County will be found in Table 1.

Social Conditions.

Kesteven is predominantly an agricultural county, A few iron stone mines are worked in the West Kesteven Rural District. Engineering and metal works are situated at Grantham, Stamford and North Hykeham. In addition, there are to be found a few minor miscellaneous trades and industries in the County. There are also large aerodromes at Cranwell, Grantham, Digby and Waddington.

During 1936 the state of employment appears to have reached a satisfactory level throughout the County.

EXTRACTS FROM VITAL STATISTICS for the YEAR.

<i>Live Births :</i>	M.	F.	Total	
Legitimate ...	774	743	1517	Birth Rate per 1,000 of
Illegitimate ...	42	31	73	estimated population: 14.09.

<i>Stillbirths :</i>				
Legitimate ...	34	26	60	Rate per 1,000 total (live
Illegitimate ...	3	3	6	and stillbirths) : 39.85.

<i>Deaths</i>	651	625	1276	†Crude Death Rate per 1,000 of estimated population: 11.31 *Nett Death Rate: 9.61
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Deaths from Puerperal Causes :

	Deaths	Rate per 1,000 total births.
Puerperal Sepsis ...	1	0.60
Other Puerperal Causes ...	5	3.02
TOTAL ...	6	3.62

Death Rate of Infants under one year of age :

All Infants per 1,000 Live Births	...	...	...	46.54
Legitimate infants per 1,000 legitimate live births	...	...	...	47.46
Illegitimate infants per 1,000 illegitimate live births	...	...	...	27.39

Deaths from Measles (all ages)	...	...	...	...	1
„ „ Whooping Cough (all ages)	...	...	...	...	6
„ „ Diarrhoea (under 2 years of age)	...	...	...	...	2
„ „ Cancer (all ages)	...	...	...	...	188

Chief Causes of Death, 1936.

	Number	Rate per 1,000 of estimated population.
1. Heart Disease	306	2.71
2. Cancer	188	1.66
3. Cerebral Hæmorrhage	98	0.85
4. Violence (Accidental)	73	0.64
5. Pneumonia	66	0.58
6. Other circulatory diseases	65	0.57

It will be observed that in Kesteven outstanding causes of death at the present time are Heart Disease, Cerebral Hæmorrhage, and Other Circulatory diseases. In 1926 there were 179 deaths from Heart Disease, 78 from Cerebral Hæmorrhage, and 44 from other Circulatory Diseases. In addition, ten years ago the deaths from Accidental Violence were only 25.

The combined total of deaths from Heart Disease, Cerebral Hæmorrhage, and Other Circulatory diseases, and Accidental Violence has shown a rise of from 337 in 1921 to 543 in 1936. In 1926 the combined total was 326, equivalent to 27.3% of the total deaths in 1926, against the figure of 42.5% of the total deaths in 1936.

Complete figures for this group, dating back to 1921, show that prior to 1926 the annual totals fluctuated between 326 and 372. A steep rise took place however after 1926.

The following table shows the average number of deaths which occurred in each age group from Cardio-Vascular Diseases and Accidental Violence.

	Average No. of deaths	Age Groups								
		0	1	2	5	15	25	45	65	75
1921-26	346.3	1.00	1.17	2.66	4.66	7.66	13.66	75.66	103.50	136.16
1927-36	492.8	1.30	0.90	3.30	4.60	11.70	17.10	91.80	143.80	218.40

It is of interest to note that there is a marked general rise in the number of deaths from the age of 15 upwards in the 1927-36 period as compared with the period 1921-26. The rise in this group of causes of death is no doubt indicative of the "speeding up" and progressive strain to which modern civilisation even in a rural community is being subjected.

†Crude Death Rate.

It is satisfactory however to note that the Crude Death Rate per 1,000 of the estimated population has fallen from 12.21 in 1935 to 11.31 in 1936.

*Nett Death Rate.

The age and sex distribution of each Local Government unit materially affects the Death Rate. To counteract this the Registrar-General has in recent years issued Comparability Factors for adjusting the local Death Rates, in order to make these comparable with the Crude Death Rate for the Country as a whole, or with the similarly adjusted Death Rate for any other area.

The factor for the administrative County is 0.85. This multiplied by the Crude Death Rate gives a Nett County Death Rate of 9.61 as against 12.1 for England and Wales.

Birth Rate.

The Birth Rate has increased from 13.72 in 1935 to 14.09 in 1936, while the Infantile Mortality Rate has fallen from 51.48 to the low figure of 46.54. I am also pleased to report that the number of deaths associated with childbirth was appreciably lower than in 1935.

GENERAL PROVISION OF HEALTH SERVICES.

Laboratory Facilities.

The medical staff of the County Council undertake the bacteriological examination of ordinary pathological specimens, e.g., Sputa for Tuberculosis and hairs for Ringworm. Swabs for Diphtheria bacilli and bloods for Widal, etc., are sent to the Clinical Research Association. Venereal Diseases specimens are sent to the Laboratory of the Staffordshire County Council at Stafford. Specimens of milk for biological investigation for Tuberculosis are sent to the Laboratory of the Sheffield University, and for bacteriological and fat content to the Midland Agricultural College. Samples of milk for investigation under the Food and Drugs Acts are sent to the County Analyst.

Ambulance Facilities.

Ambulance facilities in the County are provided by the following bodies :—

Grantham and District Motor Ambulance Service :—Mr. A. Musson, 4 Brook Street, Grantham. Telephone Number : Grantham 269.

Bourne Joint Ambulance Committee, The Police Station, Bourne. Telephone Number : Bourne 21.

St. John's Ambulance Brigade, Stamford : Mr. A. Lock, 38 St. Leonard's Street, Stamford.

Ambulances are also provided by the Sleaford Urban and East Kesteven Rural District Councils. Secretary : Mr. W. Spyvee, Southgate, Sleaford. Telephone Number: Sleaford 49.

The South Kesteven Rural District Council has its own ambulance, which is kept at the Isolation Hospital.

No complaint has been received as to the inadequacy of the ambulance service in the Area. Dr. Galletly, M.O.H. of the Bourne U.D.C., however, has drawn attention to the need of replacement of the Ambulance at Bourne.

Nursing in the Home.

The County Council have no scheme providing for general nursing in the home. This work is undertaken by the various District Nursing Associations, all of which are affiliated to the Lincolnshire Nursing Association.

There were 48 District Nurse Midwives employed by 42 Nursing Associations in Kesteven during 1936, of whom 40 acted as Infant Health Visitors, Tuberculosis, and School Nurses. Half the approved expenses of local associations, up to a maximum of £90 were paid by grant from the County Council.

Clinic and Treatment Centres.

Infant Welfare Centres.

There are nine Infant Welfare Centres in the County managed by Voluntary Bodies. The administrative expenses of these and cost of medical attendance is provided by the County Council. The Grantham Borough Council being a Maternity and Child Welfare Authority provides an additional centre at Grantham which is held weekly under the supervision of Dr. C. H. D. Robbs and a whole-time Health Visitor.

An arrangement is made with the City of Lincoln Infant Welfare Clinic for the attendance of infants resident in the Kesteven Area adjacent to Lincoln.

Address of Centre	Sessions held		Medical consultations held	Average attendance of children
	Day	Frequency		
Billinghay— Church Room	Wednesday	2nd and 4th Wednesday in month	Every session	33
Bourne—North Street	Thursday	Alternate Thursdays	Every session	37
Cranwell—Women's Social Club	Tuesday	2nd and 4th Tuesday in month	Every session	14
Heckington— Reading Room	Tuesday	1st Tuesday each month	Every session	23
Metheringham— Reading Room	Wednesday	1st and 3rd Wednesday in each month	Every session	31
Sleaford—Lafford House	Wednesday	Weekly	Fortnightly	30
Stamford—Broad Street	Wednesday	Weekly	Fortnightly	30
Waddington— Methodist Schoolroom	Tuesday	1st Tuesday each month	Every session	14
Washingborough— Methodist Schoolroom	Wednesday	1st Wednesday in each month	Every session	35

Milk Supplies.

Liquid milk and dried milk preparations and Cod Liver Oil and Malt were supplied to expectant and nursing mothers and young children under school age found to be in need of extra nourishment in accordance with the resolution of the Maternity and Child Welfare Committee, as stated in the Report for 1935.

The cost of this extra nourishment amounted to £26l 5s. 2d.

At the Lincoln Infant Welfare Centre the number of Kesteven children on the register was 46. 217 attendances were made during the year. The cost of extra nourishment or special treatment given to these cases was by arrangement refunded by the County Council.

School Clinics.

These Clinics are available for the treatment of Minor Ailments in school children. It is intended to extend these benefits to pre-school children.

Minor Ailment Clinics with sessions for intermediate treatment under supervision of the Council's Medical Staff were held at North Street, Bourne ; Beaconfield, Grantham ; Broad Street, Stamford ; and Lafford House, Sleaford, each week. During 1936 these Clinics were kept open during school holidays in summer.

Dental and Orthopædic Clinics.

These were also held at the above mentioned Clinic premises except Stamford where the Orthopædic Clinic is held at the Stamford, Rutland and General Infirmary.

Tuberculosis Clinics.

These are held weekly at Lafford House, Sleaford, each Monday morning, and at 15 Watergate, Grantham, each Saturday morning.

Venereal Diseases Clinic.

This Clinic is held on Thursday mornings at Westgate Hall, Grantham. Medical advice and treatment are given at that time by Dr. Frazer, and intermediate treatment is regularly carried out then and on other days.

Treatment is also available for Kesteven cases at Out-County Clinics mainly at Lincoln, Peterborough, Ketton, and Nottingham.

The following is a statement of the number of Kesteven cases dealt with during 1936, for the first time, and found to be suffering from :—

		Grantham	Lincoln	Peter borough	Ketton	Nottingham
Syphilis	... ..	7	1	—	4	—
Soft chancre	... ..	1	—	—	—	—
Gonorrhœa	... ..	16	5	4	8	2
Conditions other than Venereal	... ..	16	9	—	5	—
Total number of attendances	... ..	1861	308	419	619	99
Number of specimens from persons attending at Grantham treatment centre which were sent for examination to an approved laboratory	... ..	...	...	...	...	314

Orthopædic Clinics.

Clinics for orthopædic and postural defects have been regularly held. Facilities are also available for the examination and for treatment of cases of Non-Pulmonary Tuberculosis referred to Dr. Shipman by the County Council's Tuberculosis Officers.

The following are particulars of the work carried out at these Clinics during 1936 :—

Statistics. TABLE 1.

Number of cases under treatment	186
" " " taken off treatment as cured	34
" " " left the district	3
" " " left school	12
" " attendances	2764

TABLE 2. SURGICAL OPERATIONS.

Steindler's operation for claw foot	3
Open operation for Talipes	2
Anthrodesis for flail foot	2
Subtrochanteric osteotomy for hip disease	2
Osteotomy for knock knee and other deformities... ..	5
Open operation for Wry neck	2
Thoracoplasty	2
Arthrodesis for Tubercular knee	2
Congenital dislocation of the hip	1
Sacro-Iliac disease	2
Excision of Tubercular Glands	6
Developmental cysts and defects	6
Spastic Hemiplegia	2
Bone grafts for Tuberculosis of the spine	2
Various	3

Hospitals.

No change has occurred in the constitution of Voluntary Hospitals in the administrative County. Negotiations are proceeding to implement the County Council's Scheme for the better provision of Isolation Hospital accommodation in the north and west of the County. The re-organisation of the County Council's Poor Law Institutions is nearing completion, and a report will be made on the subject at a later date.

Grantham Hospital.

On April 1st, 1934, six beds (increased to 24 in 1935) were reserved in this General Hospital for the reception of patients sent in under the auspices of the Education, Public Health and Housing, and Public Assistance Committees of the County Council. The following is a classification of the cases treated during 1936 —

Tonsils and Adenoids	115
Maternity	55
Tuberculosis	15
Orthopædic	12
Burns	3
Chronic Mastoiditis	3
Scoliosis	2
Phimosis	2
Ante-Natal	2
Hernia	1

Fractured Humerus	...	...	...	...	...	...	|
Fractured Femur	...	...	...	...	...	...	|
Fractured elbow	...	...	...	...	...	...	|
Gastritis	...	...	...	...	...	...	|
Cyst of neck	...	...	...	...	...	...	|
Enlarged glands	...	...	...	...	...	...	|
Debility	...	...	...	...	...	...	|
Pelvis Cellutis	...	...	...	...	...	...	|
Infantile paralysis	...	...	...	...	...	...	|
Metorrhagia	...	...	...	...	...	...	|
Enteroptosis	...	...	...	...	...	...	|
Pyelitis	...	...	...	...	...	...	|
Bronchitis	...	...	...	...	...	...	|
Periosisitis of Femur	...	...	...	...	...	...	|
Mental condition	...	...	...	...	...	...	|
Fem. Thrombosis	...	...	...	...	...	...	|
Lacerated finger	...	...	...	...	...	...	|
Aortic incompetence	...	...	...	...	...	...	|
Sinus iliac joint	...	...	...	...	...	...	|
Carcinoma left lung	...	...	...	...	...	...	|
Carcinoma colon	...	...	...	...	...	...	|
Marasmus	...	...	...	...	...	...	|
Empyema	...	...	...	...	...	...	|
Varicose veins	...	...	...	...	...	...	|
Bronchial Fistula	...	...	...	...	...	...	|
Bronchial cyst	...	...	...	...	...	...	|
Otitis media	...	...	...	...	...	...	|

Midwives.

The County Council is the Local Supervising Authority for the whole of the administrative County. Inspection of midwives is carried out by the Superintendent Health Visitor, Miss S. E. Morris, M.B.E., As Superintendent of the Kesteven Nursing Association Miss Morris is in frequent touch with the District Nurse Midwives and has carried out regular inspections.

It was not found necessary as a result of these inspections to report any breach of the rules either to the Local Supervising Authority or to the Central Midwives Board.

The Annual Returns received from the County Midwives were as follows :—

No. of times medical help sent for (in respect of mother)	197
No. of times medical help sent for (in respect of child) ...	32
No. of forms sent in for artificial feeding ...	16
No. of deaths of mother ...	—
No. of deaths of child ...	4
No. of stillbirths (macerated) ...	5
No. of stillbirths (not macerated) ...	7
No. of cases of Ophthalmia Neonatorum ...	—
No. of times having laid out the dead ...	7
No. of times of exposure to infection ...	7

The Midwives called in Medical Help in 50 per cent of the cases attended by them.

The records show that 451 cases were attended by Midwives during 1936 ; of this number 222 were taken by them alone. In the remaining cases both doctor and midwife were in attendance.

Maternity and Nursing Homes.

The administration of the Nursing Homes (Registration) Act, 1927, is undertaken by the County Council which is the Local Supervising Authority for the whole County including the Borough of Grantham. No application has been received under section 9 (2) for delegation of powers under the Act to a District Council.

Periodic inspections of the registered homes are carried out by the Medical Staff of the Public Health Department and the County Superintendent Health Visitor. No unsatisfactory conditions were revealed during 1936.

Before any application for a certificate of registration is granted, inquiry is made as to the qualifications and suitability of the applicant. An inspection of the premises is also carried out to ensure that they conform to the necessary standard. The following are particulars of the administration of this work during 1936.

	Nursing Homes	Maternity Homes	Nursing and Maternity Homes
No. of new applications for registration	—	—	1
No. of Homes registered on 31st December, 1936 ...	1	—	3
No. of orders made refusing registration	—	—	—
No. of orders made cancelling registration	—	—	—
No. of appeals against such order	—	—	—
Homes discontinued	—	—	—

Exemptions from registration under the new Act were made in three instances, viz., one Cottage Hospital and two General Hospitals.

SANITARY CIRCUMSTANCES OF THE AREA.

The following information, taken from Reports of the District Medical Officers and Sanitary Inspectors shows the improvements which have been effected in relation to water supplies and sewerage in the four rural districts in the administrative County.

The provision of adequate and pure supplies of drinking water, and proper arrangements for the disposal of sewage are matters of fundamental importance to the public health. Besides being of great convenience to the districts served, they should also tend to improve rateable values and encourage new building. It is satisfactory therefore to note that progress is being made.

Water Supplies.

1. NORTH KESTEVEN RURAL DISTRICT.

Washingborough, Heighington, Metherringham, Branston, Nocton, Coleby and Waddington. The supplies of these parishes have been extended during the year.

Brant Broughton and Stragglethorpe, Beckingham and Sutton, Carlton-le-Moorland, Norton Disney, Stapleford, Bassingham, Thurlby, Aubourn, and Haddington. Work is now in progress for a water supply to these parishes and ought to be completed in August 1937.

Samples taken quarterly throughout the district for analysis have proved satisfactory.

2. SOUTH KESTEVEN RURAL DISTRICT.

Schemes have been prepared for and Ministry of Health enquiries held at Billingborough, Braceborough, Little Bytham, Haconby, Tallington, and West Deeping, Thurlby and Swinstead. The Council has established its case, and obtained sanction in each enquiry.

When these schemes have been effected there will remain only Manthorpe and Toft and Witham for which there is no provision. The Ministry of Health, however, have recommended that the reservoir for the Thurlby scheme be placed on top of the hill forming the water-shed between Thurlby and Manthorpe. It ought to be possible at a future date to utilise the pumping station at Thurlby to supply these two districts.

3. EAST KESTEVEN RURAL DISTRICT.

Billinghay.—During the year mains were extended and a new pumping plant installed for the supply of Dorrington Fen.

Scredington.—Mains were extended during the year.

Ashby-de-la-Launde and Bloxholme.—Work was commenced on the extension of the mains. A new bore was completed.

Cranwell.—Temporary arrangements have been made by the R.A.F. to supply Cranwell Village and the new houses in that area.

Heckington.—A pump-house has been erected and a pumping plant installed.

Martin.—A new tower has been erected.

Wilsford.—A trial well was sunk.

Samples of water taken from the public supply throughout the year have all been satisfactory with the following exceptions :—

(1) The new bore at Cranwell.

(2) The new bore at Newton Bar ; in this case the Analyst gave an opinion that the water will probably be satisfactory after a period of pumping.

4. WEST KESTEVEN RURAL DISTRICT.

Old Somerby.—A Scheme is being prepared to supply water by means of a bore, windmill pump and mains fed from a small reservoir. Such a supply is urgently needed.

Ingoldsby.—Owing to the heavier rainfall the scheme for augmenting the supply has, at the request of the Parish Council, not been carried out.

Claypole, Stubton and Fenton.—Applications are under consideration for the extension of the mains to supply certain outlying farms and houses which badly require a supply of pure water.

Long Bennington, Westborough and Dry Doddington.—In spite of considerable rainfall during the year it has been necessary to continue carting water in these three villages. The regional water scheme proposed by the Council is urgently needed in these parishes and in the 10 remaining parishes.

Drainage and Sewerage.

1. NORTH KESTEVEN RURAL DISTRICT.

North Hykeham.—A sewage scheme is in preparation.

Bracebridge Heath.—A scheme is in preparation and will include certain parts of the surrounding district.

Many areas are in need of disposal works, especially the low lying ones which are waterlogged at certain times of the year. North Hykeham is stated to be in a parlous plight, faeces at times floating up to back doors of houses during a wet winter. Something ought to be done soon to remedy this state of affairs.

2. SOUTH KESTEVEN RURAL DISTRICT.

In many villages the arrangements for drainage and sewerage leave much to be desired and some of the largest, notably Billingborough, have no scheme at all. When the new water schemes have been completed it ought to be possible to tackle the problem.

3. EAST KESTEVEN RURAL DISTRICT.

Ruskington, Helpringham, Walcot and Thorpe Tilney and Anwick.—Sewer extensions were constructed in these parishes during the year.

Cranwell Village.—Preliminary work was carried out in connection with a proposed sewage scheme.

4. WEST KESTEVEN RURAL DISTRICT.

Barrowby.—The disposal works are old, in a poor state of repair, and produce a very unsatisfactory effluent. A new chain-pump was installed for the removal of sludge from the septic tank to the lagoon.

Claypole.—The disposal works here are in a poor state of repair, but produce a fair effluent.

HOUSING.

Returns from the District Councils give the number of new houses erected during 1936 as 223, as compared with 153 in 1935.

The adjoining table summarises particulars relating to housing conditions in the County, the number of houses reported as unfit for human habitation and action taken.

	Bourne Urban D.	Grantham Borough	Sleaford U.D.	Stamford Borough	North Kesteven R.D.	East Kesteven R.D.	South Kesteven R.D.	West Kesteven R.D.
No. of new houses built by the Council	10	106	—	57	—	12	22	16
1 Inspection of dwelling houses during the year.								
(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	33	223	1538	200	280	320	1117	132
(b) Number of inspections made for that purpose	63	385	1569	240	417	590	1236	294
(2) (a) Number of dwelling houses (included under sub-head (1) above) which were inspected and and recorded under the Housing Consolidated Regulations, 1925...	12	185	—	—	96	20	130	90
(b) Number of inspections made for that purpose	12	370	—	—	107	20	218	164
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ...	2	53	2	78	30	13	59	9
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects fit for human habitation	27	170	2	17	61	203	71	84
2. Remedy of Defects during the year without service of formal notice.								
Number of defective dwelling-houses rendered fit in consequence of informal action by Authority or their Officers ...	9	—	8	14	92	3	63	33
3. Action under Statutory Powers during the year.								
A. Proceedings under Section 17, 18 and 23 of the Housing Act, 1930.								
(1) Number of dwelling houses in respect of which notices were served requiring repairs ...	9	3	17	3	12	8	2	5
(2) Number of dwelling-houses which were rendered fit after service of formal notice—								
(a) By Owners	9	3	17	3	12	5	4	—
(b) By Local Authority in default of owners	—	—	—	—	—	—	—	—
B. Proceedings under the Public Health Acts.								
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	2	58	7	—	10	—	9	9

	Bourne Urban D.	Grantham Borough	Sleaford U.D.	Stamford Borough	North Kesteven R.D.	East Kesteven R.D.	South Kesteven R.D.	West Kesteven R.D.
(2) Number of dwelling-houses in which defects were remedied after service of formal notices—								
(a) By Owners	2	25	7	—	7	—	3	9
(b) By Local Authority in default of owners	—	—	—	—	3	—	—	—
C. Proceedings under Section 19 and 21 of the Housing Act, 1930.								
(1) Number of dwelling-houses in respect of which Demolition Orders were made	—	45	2	78	30	5	59	5
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	—	12	2	78	22	6	22	3
D. Proceedings under Section 20 of the Housing Act, 1930. ...								
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	—	—	—	—	—	—	—	—
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined the tenement or room having been rendered fit ...	—	—	—	—	—	—	—	—
4. Housing Act, 1935—Overcrowding.								
(a) (i) Number of dwellings overcrowded at the end of the year	4	82	62	90	65	120	32	56
(ii) Number of families dwelling therein	5	82	63	90	65	122	35	58
(iii) Number of persons dwelling therein	37	568	377	750	475	845	246	416
(b) Number of new cases of overcrowding reported during the year	7	16	—	—	4	—	3	56
(c) (i) Number of cases of overcrowding relieved during the year	3	15	—	6	3	1	24	9
(ii) Number of persons concerned in such cases	35	98	—	30	26	4	188	70

(d) Particulars of any cases in which dwelling houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding ... Nil

(e) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report.

Sleaford Urban—Negotiations commenced for a Housing Site.

North Kesteven Rural.—Several cases reported to the Council are to be remedied as soon as the houses now in progress of erection are ready for occupation.

West Kesteven Rural.—The Council are now building 14 Council houses as part of their overcrowding programme to relieve overcrowding.

Housing (Rural Workers) Acts, 1926 and 1935.

Powers under these Acts have been delegated by the County Council. The Rural District Councils are responsible for the administration of these Acts in their respective districts.

Overcrowding.

Standards of overcrowding are laid down in recent Housing legislation and the results of reviews of districts by the Local Sanitary Authorities, given on the adjoining Table, are now available for 1936.

INSPECTION AND SUPERVISION OF FOOD.

Milk and Dairies Order, 1926.

The Urban and Rural District Councils administer this Order. No scheme exists for the routine Veterinary Inspection of Dairy Cattle. The Public Health Department of the County Council however, arrange to take samples of milk annually at selected dairy premises for biological tests for Tuberculosis. During 1936, 12 samples were taken and in no case was evidence of Tuberculosis found.

Arrangements have also been made for the examination of suspected herds and further sampling of milk by approved veterinary surgeons.

Tuberculosis Order, 1925.

The number of Tubercular animals slaughtered during the year was 325. Of this number nearly all were brought to the notice of the Authority by owners, in accordance with the requirements of the Order.

Milk (Special Designations) Order, 1936.

The Milk (Special Designations) Order, which became operative in June, 1936, simplified the nomenclature of designated milks, and also embodied various improvements to secure the production of a cleaner and safer milk supply.

In connection with the administration of the Order it is left to the County Council to decide as to the following important matters :—

1. The construction of new cowsheds—standards which should be required.
2. Co-operation and exchange of information between inspecting officials under different Milk Legislation on existing dairy premises.
3. Standardisation of methods of procedure in inspection of dairy premises and methods of clean milk production.
4. Ensuring the removal or isolation of any animal from the herd by reason of disease. It is equally important however, to control the manner of disposal of the animal. It is clearly improper that such animals should be allowed to be turned loose into another part of the country without control.

5. The identification of all animals in a herd, and checking the register of such animals.
6. Checking the quantities of milk sold by the producer and bought by the retailer.
7. The question of the provision of an "efficient steam steriliser" and what apparatus can be accepted within such term.
8. Fees to be charged.

In paragraph 10 of Circular 1533 issued by the Ministry of Health, it is stated that the Minister is advised that it is necessary, under the Milk (Special Designations) Order of 1936—although the Order itself does not insist on steam sterilisation—that Milk Producers should utilise a steam steriliser and container.

To reduce the number of bacteria gaining access to milk, it is essential that it be placed in absolutely sterile utensils. This view was endorsed by your Public Health Committee.

In Kesteven the majority of "Accredited" Producers are in possession of steam sterilisers, and those who have not have been notified of this requirement.

Under the Milk (Special Designations) Order, 1936, holders of Grade "A" Licences were allowed to retain the designation "Accredited" until the end of the year, when all licences fell due for renewal. During 1936 there were 49 Grade "A" producers and one Tuberculin Tested producer in Kesteven. In addition, 5 applications were received for "Accredited" Licences, 4 of which were granted. On the 1st January, 1937, the following licences were renewed:—

Accredited—51. Tuberculin Tested—1.

There were three refusals of "Accredited" Licences owing to the fact that the applicants were unwilling to bring their premises and methods of production into conformity with the requirements of the Public Health Department.

The administration of the Milk (Special Designations) Order, 1936, has involved a large amount of work, and visits of inspection and re-inspection to the various farms. A considerable number of minor defects of premises, equipment, and methods, have been pointed out and remedied.

In addition, in two cases steam sterilisers were installed. In one case the dairy was reconstructed, and in the other a new dairy was erected.

The Public Health Department has not so far insisted upon extensive alterations or improvements to existing buildings. In some cases I have visited the farm in conjunction with the local Sanitary Inspector, who is the official concerned with dairy premises under the Milk and Dairies Order, 1926.

Co-operation is also established with the Milk Advisory service of the County Council, whereby all new applicants are notified to the Agricultural Organiser who may offer to give advice on clean milk production. The results of quarterly samples of milk taken under the Milk Advisory service are passed to the County Medical Officer.

Food and Drugs (Adulteration) Act, 1928.

The County Council, with the exception of the Borough of Grantham which is a separate authority, administers through the Police the provisions of this Act in the administrative County.

The number of samples submitted to the Public Analyst during 1936 totalled 175, as follows :—

76 samples of milk, 7 of Potted Meat, 7 of Sausages, 7 of Lard 6 of Margarine, 6 of Cream, 6 of Cheese, 5 of Butter, and 55 other articles.

12 samples of milk were found to be adulterated, and 1 sample of margarine inferior.

The following table shows the action taken in respect of these twelve samples of milk :—

<i>Sample.</i>	<i>Adulteration.</i>	<i>Action taken.</i>
Milk. 16% of added water.		Vendor summoned.
„ 10% of the required fat deficient.		Vendor cautioned.
„ 6% „ „ „ „		„ „
„ 15% „ „ „ „		„ „
„ 12% „ „ „ „		„ „
„ 11% „ „ „ „		„ „
„ 10% „ „ „ „		„ „
„ 8% „ „ „ „		„ „
„ 6% „ „ „ „		Vendor summoned
„ 4% „ „ „ „		Vendor cautioned
„ 4% „ „ „ „		„ „
„ 4% of added water.		„ summoned

Borough of Grantham.

88 samples were submitted to the Public Analyst during 1936, as follows :—

Milk.—76 of which 13 were formal samples. The remainder were informal samples of miscellaneous foodstuffs and drugs, all of which were found to be genuine. In the case of milk one of the informal samples was found to be deficient in fat to the extent of 9%. This sample was followed by formal samples which were found to be genuine.

Milk (Special Designations) Order, 1923.

14 informal samples of pasteurised and one of Grade “A” were sent for bacteriological examination.

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES.

Notification.

During 1936, 510 cases of infectious diseases were notified under the various Acts and Orders. The adjoining table shows the number, distribution and attack rates of the various diseases.

Table showing the Distribution of Notified Cases of Infectious Diseases in Rural and Urban Districts.

SANITARY DISTRICT	Total No. notified	Diphtheria	Erysipelas	Scarlet Fever	Enteric Fever	Puerperal Fever	Puerperal Pyrexia	Pulmonary Tuberculosis	Non-Pulmonary Tuberculosis	Smallpox	Cerebro Spinal Fever	Ophthalmia Neonatorum	Pneumonia	Encephalitis Lethargica	Polio-myelitis	Dysentery	Polioence-phalitis
Bourne U.D.	20	—	1	6	—	2	2	4	—	—	—	—	5	—	—	—	—
Grantham M.B.	173	51	9	52	1	2	1	15	10	—	—	2	30	—	—	—	—
Sleaford U.D.	35	—	1	—	1	—	1	9	2	—	—	—	20	1	—	—	—
Stamford M.B.	31	1	1	11	1	—	3	8	4	—	—	1	1	—	—	—	—
Aggregate of Urban Districts	259	52	12	69	3	4	7	36	16	—	—	3	56	1	—	—	—
East Kesteven R.D.	100	2	5	62	4	—	—	8	3	—	—	—	16	—	—	—	—
North Kesteven R.D.	73	15	11	12	5	—	3	14	5	—	—	—	8	—	—	—	—
South Kesteven R.D.	31	2	4	11	—	—	—	6	4	—	—	—	4	—	—	—	—
West Kesteven R.D.	47	16	—	6	3	—	1	6	7	—	—	1	7	—	—	—	—
Aggregate of R.D.'s.	251	35	20	91	12	—	4	34	19	—	—	1	35	—	—	—	—
Totals for whole County	510	87	32	160	15	4	11	70	35	—	—	4	91	1	—	—	—
Rate per 1,000 living	4.51	0.77	0.28	1.41	0.13	0.03	0.09	0.62	0.31	—	—	0.03	0.80	0.08	—	—	—

Ophthalmia Neonatorum.

Particulars of Cases during 1936 :—

Notified	Cases		Vision unimpaired	Vision impaired	Total Blindness	Deaths
	At Home	Hospital				
4	4	—	4	—	—	—

WELFARE OF THE BLIND.

I am indebted to Mrs. Greenall who has furnished me with the following particulars :—

KESTEVEN BLIND SOCIETY.

Registration.

New cases registered ...	...	...	...	...	...	20
Come into the area ...	...	...	...	...	...	4
Left the area ...	...	...	...	...	...	4
Change of address within the area ...	...	...	...	...	...	13
Removed from register as "no longer blind"	...	...	...	...	...	1
Deaths ...	...	...	...	...	...	20

Age Periods.

5—16.	16—21.	21—40.	40—50.	50—65.	65—70.	70 and over.	Total
5	4	20	12	40	31	80	192

Observation List.

We have 60 persons on this list who are visited from time to time by our Home Teacher ; these include children, who on leaving elementary schools, still require ophthalmic treatment.

There are 4 children at Special Schools for the Blind.

Two Telephone Operators are employed at the Grantham R.A.F. Head Quarters, and 4 St. Dunstan men reside in our area.

We have 10 Home Workers, 6 are included in the Nottingham Institution's Home Worker's Scheme, and 4 are supervised by our own Home Teacher. These have all been regularly employed and a large amount of work has also been done by our Second Grade workers thus giving them occupation as well as the help of their earnings. An Exhibition and Sale of work done by our own Blind people which was held in Bourne realised over £34 in actual sales, and resulted in several further orders. We have also purchased goods made by our Blind for Prizes for the Whist Drive arranged for the Society's Funds. Other orders have been obtained for them through our Home Teacher, 105 potato baskets being made for one firm alone, and they have also sold a good deal of work privately. 260 coal and coke sacks have been made and sold and 2,660 lbs. of Tea during the year.

All necessitous blind persons in the area are now relieved through the Society and allowances varying from 1/- to 15/- a week have been paid to 80 blind persons, and help in kind has also been given as required.

Nine of our blind are in receipt of pensions from other Societies, ranging from £5 to £26 a year.

Our Home Teacher has paid over 1,200 visits.

Twenty persons are supplied with books from the National Library for the Blind, postages being paid by the Society for the most needy. Newspapers and magazines in embossed type are also supplied as required.

The Society arranged a Party for the blind in the Stamford district and elsewhere they have been entertained by the Women's Institutes and other organisations.

Help in providing spectacles and medical advice has been given as and when required. The Society now has an arrangement with the Nottingham Eye Hospital whereby a small fee is paid for each out-patient instead of a subscription being given as in the past.

TUBERCULOSIS.

Notification.

The following figures show the position of the County as regards existing cases of Tuberculosis at the end of the year 1936.

<i>Pulmonary.</i>			<i>Non-Pulmonary</i>			<i>Total</i>
<i>Male.</i>	<i>Female</i>	<i>Total.</i>	<i>Male</i>	<i>Female</i>	<i>Total.</i>	<i>Cases</i>
221	204	425	90	63	153	578

Particulars of new notifications of Tuberculosis and of all deaths for the disease during 1936 are shown below.

AGE PERIOD	NEW NOTIFICATIONS INCLUDING SUPPLEMENTAL RETURN				DEATHS			
	PULMONARY		NON-PULM.		PULMONARY		NON-PULM.	
	M	F	M	F	M	F	M	F
Under 1 year ...	-	-	-	1	-	-	-	1
1 — 5 years ...	-	1	4	6	-	-	1	-
5 — 10 " ...	2	2	1	3	-	-	-	-
10 — 15 " ...	2	1	1	2	-	1	-	-
15 — 20 " ...	2	4	2	2	-	3	-	1
20 — 25 " ...	4	7	2	5	3	3	-	-
25 — 35 " ...	9	11	3	4	5	6	2	-
35 — 45 " ...	5	7	2	1	3	2	-	1
45 — 55 " ...	4	4	-	1	2	2	1	-
55 — 65 " ...	4	2	1	-	2	-	1	1
65 and upwards ...	2	3	-	-	2	4	1	-
TOTALS	34	42	16	25	17	21	6	4

Prevalence of Tuberculosis.

The number of notifications of Pulmonary Tuberculosis in 1936 was 76 against 102 in 1935, while the number of deaths was 38, a decrease of 19 on the figure for 1935. The death rate therefore reached the low figure of 0.34 per 1,000 of the population. This is a record for the County.

There were 41 notifications of Non-Pulmonary Tuberculosis against 41 in 1935. The number of deaths was 10 against 12 in 1935, and the death rate for 1936 was 0.106.

The total number of notifications for 1936 was therefore 117 as against 142 last year and the deaths 48 as against 69.

Supplemental Return.

Included in the total of 117 new notifications were 6 cases each of Pulmonary and Non-Pulmonary Tuberculosis. These represented Transfers from other areas, other than transferable deaths.

The Public Health (Tuberculosis) Regulations 1930 provide that every medical practitioner attending a person shall, within 48 hours after becoming aware that such person is suffering from Tuberculosis, notify the case to the Medical Officer of Health of the district in which the patient resides at the time ; in the case of a Hospital the notification must be sent to the Medical Officer of Health of the district in which the usual place of residence of the patient is situated.

To maintain proper control of the disease, it is essential that the general practitioner should notify immediately every case of which he becomes aware.

It is the duty of the District Medical Officer of Health to keep a register of notifications for his area, and where there is prima facie evidence of neglect to notify, steps should be taken to obtain an explanation of this omission from the medical attendant. If the explanation is not satisfactory, the Local Authority has power to institute proceedings under Sec. 1 (3) of the Public Health Act, 1896.

Dispensary Organisation.

The Tuberculosis Scheme provides for two Tuberculosis Dispensaries at Grantham and Sleaford with populations of 20,010 and 7,232 respectively. Stamford with 10,080 has no dispensary, and it will be a question for the Council to decide whether in the future Stamford should have a separate dispensary.

Meanwhile reasonably effective supervision of patients in areas not provided by dispensaries is maintained by home visits by the Council's Medical Staff. A separate centre in a populous area however presents the inhabitants with better facilities for consultation and advice and for examination.

New Cases.

In connection with the work of the Dispensaries the Tuberculosis Officers examined 150 new cases, of which 68 were diagnosed as suffering from Tuberculosis of the lungs and 27 from other forms of Tuberculosis. Of the remaining cases 45 were found to be not tuberculous.

The number of patients on the Dispensary Registers at the end of the year was 475, and the number of attendances at the Dispensaries 553.

Contacts.

The number of contacts examined in 1936 was 103 of which 3 were found to be definitely tuberculosis. In 4 cases the diagnosis was not completed at the end of the year.

Adult contacts who gave consent and were available were examined either at the dispensary or at home. All child contacts were similarly examined and kept under observation when necessary at 3 or 6 months intervals.

Appropriate cases were also examined at the nearest school clinic or at school medical inspections.

Domiciliary Treatment.

All cases on the Dispensary Register are under the supervision of the Tuberculosis Officers but as a rule treatment is not given at the dispensaries. Patients requiring domiciliary treatment are referred to their private medical practitioners. Refills of artificial pneumothorax cases were carried out either at Lincoln or Peterborough Hospitals.

X-Ray Examinations.

There were 39 X-Ray examinations made for diagnostic purposes. These were performed at Grantham, Lincoln or Peterborough.

Laboratory Examinations.

Specimens of sputa are received for examination at the County Health Office or at Beaconsfield, Grantham, from the Tuberculosis Dispensaries, general practitioners, and from the various hospitals and other institutions in the area. During 1936, 167 such examinations were carried out by the Council's Medical Staff.

Shelters.

12 open-air shelters have been in continuous use throughout the County. These shelters are loaned to patients on the advice of the Tuberculosis Officers, and are a valuable adjunct in the treatment of Tuberculosis. These may be provided in suitable cases after return from sanatorium, or where overcrowding or other unsatisfactory home conditions prevail.

TABLE SHOWING THE WORK OF THE DISPENSARIES.

DIAGNOSIS	Pulmonary				Non-Pulmonary				TOTAL				GRAND TOTAL
	Adults		Children		Adults		Children		Adults		Children		
	M	F	M	F	M	F	M	F	M	F	M	F	
A.—NEW CASES examined during the year (excluding contacts :— (a) Definitely tuberculous „(b) Diagnosis not completed (c) Non-tuberculous	27	31	5	5	6	17	3	11	33	48	8	16	105
	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	12	19	8	6	45
CONTACTS.— examined during the year — (a) Definitely tuberculous „(b) Diagnosis not completed (c) Non-tuberculous	—	1	2	—	—	—	—	—	—	1	2	—	3
	—	—	—	—	—	—	—	—	—	1	—	3	4
	—	—	—	—	—	—	—	—	8	8	37	43	96
C.—CASES written off the Dispensary Register as :— (a) Recovered (b) Non-tuberculous including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous	13	21	8	14	6	13	9	9	19	34	17	23	93
	—	—	—	—	—	—	—	—	35	45	67	71	218
D.—NUMBER OF CASES on Dispensary Register on December 31st — (a) Definitely tuberculous (b) Diagnosis not completed	143	158	46	20	31	26	29	22	174	184	75	42	475
	—	—	—	—	—	—	—	—	—	—	—	—	—
1. Number of cases on Dispensary Register on January 1st 637					2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years 12								
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" 86					4. Cases written off during the year as Dead (all causes) 30								
5. Number of attendances at the Dispensary (including Contacts) ... 553					6. Number of Insured Persons under Domiciliary Treatment on the 31st December 79								
7. Number of consultations with medical practitioners :— (a) Personal — (b) Other —					8. Number of visits by Tuberculosis Officers to homes (including personal consultations) 381								
9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes 1916					10. Number of :— (a) Specimens of sputum, etc. examined 167 (b) X-ray examinations made 39 in connection with Dispensary work								
11. Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above —					12. Number of "T.B. plus" cases on Dispensary Register on December 31st 180								

Return showing the immediate results of treatment of definitely tuberculous patients discharged during the year from Institutions (other than Poor Law Institutions) approved for the treatment of Tuberculosis.

Classification on admission to the Institution.	Condition at time of discharge	Duration of Residential Treatment in the Institution.																Grand TOTALS		
		*Under 3 months but exceeding 28 days.				3-6 months				6-12 months				More than 12 months					TOTALS	
		M.	F.	Ch.		M.	F.	Ch.		M.	F.	Ch.		M.	F.	Ch.				
Class T.B. minus.	Quiescent ...	-	1	-		-	-	-		-	3	2		-	1	1		5	3	8
	Not quiescent ...	3	5	-		1	3	-		-	1	-		-	-	-		4	9	13
	Died in Institution ...	-	-	-		-	-	-		-	-	-		-	-	-		-	-	-
Class T.B. plus. Group I.	Quiescent ...	-	-	-		-	-	-		-	-	-		-	-	-		-	-	-
	Not quiescent ...	3	1	-		-	2	-		2	1	-		1	2	-		6	6	12
	Died in Institution ...	-	-	-		-	-	-		-	-	-		-	-	-		-	-	-
Class T.B. plus. Group II.	Quiescent ...	-	1	-		1	-	-		-	-	-		1	-	-		2	1	3
	Not quiescent ...	-	3	-		5	1	-		4	5	-		2	-	-		11	9	20
	Died in Institution ...	-	-	-		1	-	-		1	-	-		-	-	-		2	-	2
Class T.B. plus. Group III.	Quiescent ...	-	-	-		-	-	-		-	-	-		-	-	-		-	-	-
	Not quiescent ...	-	1	-		1	2	-		-	1	-		-	-	-		1	4	5
	Died in Institution ...	1	2	-		1	1	-		-	2	-		-	1	-		2	6	8
	TOTALS (pulmonary) ...	7	14	-		10	9	-		7	13	2		4	4	1		28	40	71

PULMONARY TUBERCULOSIS

Bones and joints	Quiescent	...	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Not quiescent	...	...	1	2	1	-	-	1	2	1	-	-	-	3	2	8
	Died in Institution	...	...	-	-	-	-	-	-	1	-	-	-	-	1	-	1
Abdominal.	Quiescent	...	...	-	-	-	-	-	-	-	2	-	1	-	1	2	3
	Not quiescent	...	...	-	-	2	1	-	1	1	-	-	1	-	3	-	7
	Died in Institution	...	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Organs	Quiescent	...	...	-	-	-	-	-	-	-	1	-	-	-	-	1	1
	Not quiescent	...	...	1	-	-	-	-	-	-	-	-	-	-	1	-	1
	Died in Institution	...	...	1	-	-	-	-	-	-	-	-	-	-	1	-	1
Peripheral glands.	Quiescent	...	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	Not quiescent	...	...	-	-	1	-	-	1	-	-	-	-	-	-	2	2
	Died in Institution	...	...	-	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTALS	(non-pulmonary)	...	...	3	2	4	1	-	3	4	4	-	2	-	1	6	24

Residential Institutions.

Return showing the extent of Residential Treatment during the year 1936.

	In Institutions January 1st			Admitted during the year			Discharged during the year			Died in the Institutions			In Institutions on Dec. 31st		
	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch
Pulmonary	34	28	8	37	37	11	24	34	3	4	6	—	43	25	16
Non-Pulmonary	1	3	1	14	12	10	8	6	8	2	—	—	5	9	3

Return showing the extent of Residential Treatment in Poor Law Institutions during 1936.

	In Institutions January 1st			Admitted during the year			Discharged during the year			Died in the Institutions			In Institutions on Dec. 31st		
	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch
Pulmonary	—	—	—	3	—	—	3	—	—	—	—	—	—	—	—
Non-Pulmonary	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—

CANCER.

The Ministry of Health require a detailed statement as to the facilities in the area for the diagnosis and treatment of Cancer.

Patients affected with Cancer may be admitted to the County Council Institutions at Grantham or Stamford where surgical treatment is available in cases of emergency. Where possible however, cases are referred to Grantham Hospital. At this General Hospital the County Council has a reservation of 24 beds for surgical and acute medical cases.

Facilities for Cancer treatment provided by Voluntary Hospitals. in Kesteven.

Type of treatment available in 1936	In Institution				Other facilities for Cancer cases
	Medical	Surgical	Radium	Deep X-Ray	
Grantham Hospital	Yes 4 cases	Yes 22 cases	—	—	5 cases treated by Radium or Deep X-Ray at other institutions. Approved cases can be sent to Lincoln County Hospital for Radium treatment. Arrangements with Nottingham General Hospital for Deep X-Ray Therapy In and Out-patient. Contributors may be sent to London Cancer Hospital. Grantham Hospital has small Radium Fund.
Stamford Rutland and General Infirmary Association	Yes Particulars	Yes not available.	—	—	Approved cases can be sent by the Association to Guy's, St. Bartholomew's, St. Thomas's and Chelsea Hospital for Women. The Committee of the Stamford Infirmary may in approved cases make an ex-gratia grant per In-patient day in respect of contributors.
Butterfield Hospital, Bourne	Yes Particulars	Yes not available.	Yes	—	Approved cases can be sent to Peterborough Hospital, or to certain hospitals in London. There is a joint Bourne—Peterborough Collecting Scheme, and a working arrangement between Peterborough and Middlesex Hospitals.

The deaths from Cancer in the area shown as aggregate of urban and rural areas are given in table. III

The subjoined table shows the deaths which occurred from Cancer in Kesteven during the past decade.

Year	Total number of deaths.	Death rate per 1,000 population.	
		County of Kesteven	England and Wales
1927	152	1.40	1.37
1928	182	1.66	1.42
1929	187	1.69	1.43
1930	159	1.45	1.45
1931	163	1.48	1.48
1932	156	1.41	1.51
1933	171	1.55	1.52
1934	181	1.64	1.56
1935	177	1.61	1.58
1936	188	1.66	—

J. H. CLARKE,
County Medical Officer of Health.

Table I.—Vital Statistics.

DISTRICT	Population	No. of Births	Birth Rate	Number of Deaths	Death Rate	Illegitimate Births	Deaths under 1 year	Infant Mortality Rate
Bourne	4,628	73	15.75	57	12.31	6	4	54.79
Grantham	20,010	291	14.54	240	12.04	10	7	24.05
Sleaford	7,232	105	14.51	79	10.92	5	9	85.71
Stamford	10,080	132	13.09	124	12.30	8	8	60.60
Total Urban Districts	41,950	601	14.31	500	11.91	29	28	46.58
East Kesteven	20,670	307	14.34	194	9.38	14	14	46.60
North Kesteven	20,700	278	13.47	215	10.38	12	10	39.97
South Kesteven	13,890	216	15.55	160	11.51	9	11	50.92
West Kesteven	15,590	188	12.05	207	13.27	9	11	58.51
Total Rural Districts	70,850	989	13.95	776	10.95	44	46	46.51
Total Administrative County	112,800	1,590	14.09	1,276	11.31	73	74	46.54

Table II.—Showing for Each District the Number and Causes of Death during 1936.

CAUSES OF DEATH	Bourne UD.C.	Grantham Borough	Sleaford U.D.	Stamford Borough	E. Kesteven	N. Kesteven	S. Kesteven	W. Kesteven	TOTALS
Typhoid and Paratyphoid Fevers	-	-	-	-	1	1	-	-	2
Measles	-	-	-	1	-	-	-	-	1
Scarlet Fever	-	-	-	-	-	-	-	-	-
Whooping Cough	-	5	1	-	-	-	-	-	6
Diphtheria	-	1	-	-	-	1	-	2	4
Influenza	-	1	-	-	1	2	1	3	8
Encephalitis Lethargica	-	-	-	-	-	-	-	-	-
Cerebro-spinal Fever	-	-	-	-	-	-	-	-	-
Tuberculosis of Respiratory system	1	6	3	6	4	5	5	8	38
Other Tuberculous Diseases	1	2	-	2	1	3	1	-	10
Syphilis	-	1	-	-	-	1	-	-	2
General Paralysis of the Insane (Tabes dorsalis)	-	3	-	-	-	-	-	-	3
Cancer, malignant disease	6	37	15	19	26	34	18	33	188
Diabetes	-	4	1	-	3	3	1	2	14
Cerebral Haemorrhage, etc.	5	27	6	10	7	18	12	13	98
Heart Disease	21	58	13	24	47	60	38	45	306
Aneurysm	-	-	-	1	-	-	-	-	1
Other Circulatory Diseases	2	13	5	7	14	8	1	15	65
Bronchitis	-	6	-	9	8	6	11	4	44
Pneumonia	2	12	5	6	6	15	8	12	66
Other Respiratory Diseases	-	3	-	1	-	1	1	-	6
Peptic Ulcer	-	-	2	1	-	1	2	2	8
Diarrhoea, etc.	1	-	-	-	1	-	-	-	2
Appendicitis	-	-	-	-	1	-	1	2	4
Cirrhosis of Liver	1	-	-	-	1	1	1	1	5
Other Diseases of Liver &c.	-	1	-	1	2	1	1	1	7
Other Digestive Disease	1	4	3	2	4	1	1	4	20
Acute and Chronic Nephritis	5	-	3	1	13	3	10	7	42
Puerperal Sepsis	-	1	-	-	-	-	-	-	1
Other Puerperal Causes	-	-	1	1	1	-	1	1	5
Congenital Debility, Premature Birth, Malformations, &c.	2	5	8	8	9	7	10	9	58
Senility	2	13	-	9	3	11	13	12	63
Suicide	1	2	-	2	1	2	3	1	12
Other Violence	-	21	4	3	15	9	7	14	73
Other defined causes	6	12	9	9	21	19	13	15	104
Causes ill-defined or unknown	-	2	-	1	4	2	-	1	10
	57	240	79	124	194	215	160	207	1276

CAUSES OF DEATH at Different Periods of Life in the Administrative County of Lincoln (Parts of Kesteven), 1936.

[illegible]

